| pplicant(s): J.M. Huber C     | RANSMISSION BY FACSI                    | INDLE (37 CFR 1.8)   | Docket No.<br>02-215 |
|-------------------------------|---|--|----------------------|
| Application No.<br>10/717,310 | Filing Date<br>11/19/03                 | Examiner Peter J. Lish   | Group Art Unit       |
| vention:                      |   |  |                      |
| abilized Vaterite             |   | CE   | RECEIVED             |
|                               |   |  | SEP 0 1 2005         |
| hereby certify that this _    |   | mittal (2 pages) and Amendment<br>Identify type of correspondence)<br>and Trademark Office (Fax. No. |                      |
| on September 1, 2             |   | · · · · · · · · · · · · · · · · · · ·  |                      |
| (Date)                        |   |  |                      |
|                               |   |  |                      |
|                               | *************************************** | Kimberly Shap  | olro                 |
|                               |   | (Typed or Printed Name of Person S   | iguing Carificata)   |
|                               |   | (Signature)  | Magur-               |
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# FEE FOR CLAIMS

3. The fee for claims (37 C.F.R. § 1.16(b)-(d) ) has been calculated as shown below:

| CLAIMS            | NO. FILED | NO. EXTRA | FEES  |     |  |
|-------------------|-----------|-----------|-------|-----|--|
| Total             | 3-20 =    | 0         | X18   | \$0 |  |
| Independent       | 1-3 =     | 0         | X84   | \$0 |  |
| Multiple depender | \$280     | \$0       |       |     |  |
|                   |           |           | TOTAL | \$0 |  |

| [X] | As | shown | above, | no | additional | fee | for | claims | is 1 | required |  |
|-----|----|-------|--------|----|------------|-----|-----|--------|------|----------|--|
|-----|----|-------|--------|----|------------|-----|-----|--------|------|----------|--|

| [ ] Total additional fee for claims required \$ |  |  |
|---|--|--|
|---|--|--|

## FEE PAYMENT

Authorization is also given to charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 08-3115.

Respectfully submitted,

September 1, 2005

David M. Goodrich Reg. No. 42,592

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#### CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being transmitted by facsimile to the Patent Central FAX Number, 571-273-8300 on September 1, 2005.

Kinhy Shapers

**DOCKET NO. 02-215** 

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: application of:

Sung-Tsuen Liu

Serial No. 10/717,310

Filed: November 19, 2003

For: Stabilized Vaterite

Group Art Unit: 1754

Examiner: Peter J. Lish

Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450

### <u>AMENDMENT</u>

This Amendment is being filed in response to the Office Action dated May 4, 2005 in the above-identified application. This response is being filed before September 4, 2005, along with a one-month extension.

Amendments to the Specification There are no such amendments in this paper.

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.